## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48		
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Our Principles PAC	C C00603621		
_	G 600003021		
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y		
Full Name of Payee	Date of Public Distribution/Dissemination		
Campaign Solutions	01 29 2016		
Mailing Address 117 N. St. Asaph Street	Amount		
City State Zip Code	3937.50		
Alexandria VA 22314	Transaction ID : SE.4256  Date of Disbursement or Obligation		
Purpose of Expenditure Voter contact-email  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	Sought: House District:		
Donald J. Trump Oppose	President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For:		
Full Name of Payee	Date of Public Distribution/Dissemination		
DDC Advocacy	01 29 2016		
Mailing Address 805 15th Street, N.W.	Amount		
Suite 300	rinduit		
City State Zip Code	34545.53		
Washington DC 20005	Transaction ID : SE.4235 Date of Disbursement or Obligation		
Purpose of Expenditure Direct mail services  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	Sought: House District:		
Donald J. Trump Oppose	President Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For:		
(a) SUBTOTAL of Itemized Independent Expenditures	38483.03		
(h) OUDTOTAL of Heliconical hadron 1 - 1 - 2			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7		
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.			
Jamie Jodoin  [Electronically Filed] Date 0	1 29 2016		
Signature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Our Principles PAC	C C00603621
Check if X 24-hour report 48-hour report New report Amends report	rt filed on
Full Name of Payee	Date of Public Distribution/Dissemination
DDC Advocacy	01 29 2016
Mailing Address 805 15th Street, N.W.	Amount
Suite 300	
City State Zip Code Washington DC 20005	36129.60 Transaction ID : SE.4237
	Date of Disbursement or Obligation
Purpose of Expenditure Voter contact-telephone calls  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support	Office Sought: House District:
Donald J. Trump Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
DDC Advocacy	01 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 805 15th Street, N.W.	
Suite 300	Amount
City State Zip Code	4816.44
Washington DC 20005	Transaction ID : SE.4245  Date of Disbursement or Obligation
Purpose of Expenditure Voter contact-telephone calls  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support	Office Sought: House District:
Donald J. Trump Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1636747.59	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	40946.04
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	<b>&gt;</b>
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent or party committee) any political party committee or its agent.	
Jamie Jodoin [Electronically Filed] Date	01 29 2016
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	INT EXI END	TIONES		PAGE 3 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Our Principles PAC				C C00603621
Check if 24-hour report 48-hour report	New re	port Amends repo		I = M / D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
DDC Advocacy				01 29 7 2016
Mailing Address 805 15th Street, N.W.			Amou	ınt
Suite 300				
City	State	Zip Code		5121.93
Washington	DC	20005		saction ID : SE.4246 of Disbursement or Obligation
Purpose of Expenditure Direct mail services		Category/ Type		W = M / D = D / Y = Y = Y = Y
Name of Federal Candidate		Support	Office Sough	nt: House District:
Donald J. Trump		X Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, ,	196095.97	Disbursemer 2016	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Granite Lists, LLC				01 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1283 Main Street			Amou	unt
City	State	Zip Code		500.00
Dublin	NH	03444		action ID : SE.4249 of Disbursement or Obligation
Purpose of Expenditure List rental		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sough	ht: House District:
Donald J. Trump		X Oppose	X Presid	lent Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		1796942.19	Disbursemer 2016	nt For:
(a) SUBTOTAL of Itemized Independent Expendit	ures			5621.93
(a) collection in the management and an arrival				7
(b) SUBTOTAL of Unitemized Independent Expen	ditures		•	4 1 4 1 4
(c) TOTAL Independent Expenditures			· •	17.17.12.
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authorize			
Jamie Jodoin	[Electro	nically Filed] Date	M M /	29 2016
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Our Principles PAC	C C00603621		
Check if Z 24-hour report 48-hour report New report Amends report file	d on M M / D D / Y Y Y Y		
Full Name of Payee Targeted Victory	Date of Public Distribution/Dissemination		
Mailing Address 1033 N. Fairfax Street	01 29 2016 Amount		
Suite 400			
City State Zip Code Alexandria VA 22314	1434.24  Transaction ID : SE.4252  Date of Dishurament or Obligation		
Purpose of Expenditure List rental  Category/ Type	Date of Disbursement or Obligation		
Name of Federal Candidate Support Office	ce Sought: House District:		
Donald L Trump	President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought  Dist 201	oursement For:		
Full Name of Payee	Date of Public Distribution/Dissemination		
Mailing Address	M M / D D / Y Y Y Y		
	Amount		
City State Zip Code			
Durance of Europe diture	Date of Disbursement or Obligation		
Purpose of Expenditure  Category/ Type	M M / D D / Y Y Y Y		
Name of Federal Candidate Support Offi	ce Sought: House District:		
Oppose	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought	bursement For:		
(a) SUBTOTAL of Itemized Independent Expenditures	1434.24		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	86485.24		
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.			
[Electronically Filed] Date	01 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			